

List the name of the funding source and amount received for the **project** for each fiscal year. Include all government funding from Federal, State, County, and other cities.

List Other Sources Below:

List the name of the funding source and the ***anticipated*** amount to be received. Enter the status of the funding commitment by entering the most appropriate option from the following list of choices: Funding Secured, Awaiting Final Approval, Awaiting Response, or Status Unknown. Calculate the percentage of the total budget. Include all government funding from Federal, State, County, and other cities.

List Other Sources Below:

▲ ◡

15. **Agency Background**

a) When was your agency established? b) What is the **agency's** mission statement? c) How many years has the **agency** provided social services? d) What is the **agency's** social service history, such as type of service/activity conducted, track record and accomplishments? e) Describe any collaboration with other nonprofit agencies [e.g. as a subcontractor to provide direct services or as a referral source to or for other agencies]. f) Indicate if any volunteers are utilized, if so, how are they utilized? g) Describe the region(s) and/or communities the agency has served.

16. **Need Addressed**

a) What local community problem does your **project** address? Specifically, what health, safety, educational, shelter, or other social need would be addressed by the **project**? [Describe only the need, **not** how the need will be addressed.] b) Provide independent data and/or statistics that support the importance of addressing this community problem and identify all data sources. c) Indicate if this need is not currently being met by other projects in the City of San Diego.

17. **Geographic Location**

Describe the geographical location that the **project** serves. Specifically, the City Council District(s) and communities within the district(s) that will benefit from the **project**.

18. **Project Goal**

What is the **project's** goal? A goal must reflect a statement of condition/situation to be influenced, changed or maintained for the target population. [Stating a goal of just providing **project** services is not acceptable.]

19. **City-Funded portion of Project Target Population**

- a) 1} Enter the approximate number of total unduplicated clients to be served by the **project** and the number and percentage who fall in the low-income level. (See instructions):

(a) Total Unduplicated Number of Clients to be Served in FY 2004:

%

(b) Total Unduplicated Number of Low-Income Clients to be Served in FY 2004:

(c) Percentage of Unduplicated Number of Low-Income Clients to be Served in FY 2004:

- 2} List the total number of unduplicated clients the **project** has served the past 3 fiscal years:

Fiscal Year	2001	2002	2003 (Estimate)
Number of Clients			

- 3} Explain the changes in the total number of unduplicated clients count from the actual counts of FY 2001 to estimated counts of FY 2004. Specifically, why have the counts remained the same, increased or decreased over the four (4) fiscal years?

- b) 1} Explain how the total number of unduplicated clients for FY 2004 was determined for the **project**. 2} Describe what mechanism/procedure will be utilized by the **project** to ensure that unduplicated clients count will be collected, maintained and reported for FY 2004.

- c) Describe what efforts will be made by your agency to promote **project** services to the target population (low-income, City of San Diego residents).

- d) List estimated percentages of **project**'s target population's demographic characteristics for FY 2004. Characteristics listed should be as follows: gender, ethnicity, race, age, female-headed household, and income levels.

- e) A list of the minimum City project record requirements is provided in the instructions, which includes the demographic characteristics listed above. 1} Explain how the demographic percentages listed above were determined for the **project**. 2} Describe what mechanism/procedure will be utilized by the **project** to ensure that demographic data, as well as other data and records that may be required by the City will be collected and maintained for FY 2004. 3} List any additional items/records that have not previously been presented that will be collected and maintained by the **project**.

20. **City-Funded portion of Project Objectives**

What are the specific and measurable objectives of the **project**? [This should *not* be a restatement of the **project** goal, but rather should be stated in specific measurable terms. To be measurable, an objective must be stated in countable terms within a specific timeframe.] For each objective, provide the following: a) the percentage and description of the target population that will achieve the objective; b) a description of the objective to be achieved; c) the timeframe within which the target population will achieve the objective [i.e. demonstrate that the objective will be achieved within the 12-month contract period]; d) how the objective will be measured; and e) how the objective addresses the need detailed in section 16.

21. **City-Funded portion of the Project Evaluation**

- a) Describe the method(s) that will be utilized to evaluate the success of the **project** and determine whether objectives were accomplished. For each objective detailed in Section 19, provide the following: 1 } describe what evaluation tools will be utilized [e.g. progress reports, pre- and post-tests, client surveys, etc.]; 2 } explain how these evaluation tools are utilized to determine achievement of the objective; 3 } indicate how often the achievement of the objective is measured [e.g. weekly, monthly, quarterly, etc.]; and 4 } to whom are the evaluation reports submitted to.

- b) 1 } List the job title(s) of the staff person(s) who will be responsible for **project** evaluation [i.e. measuring achievement of objectives] and 2 } describe their qualifications.

22. City-Funded portion of the Project Services

List what services will be provided. For each type of service identified, provide the following: a) a description of the service; b) the number of unduplicated clients to be provided with each service; c) the definition of the unit of service to be provided [e.g. counseling sessions, job search activities, bed nights provided, etc.]; d) the number of units of service to be provided; e) the frequency of each service to be provided [e.g. daily, weekly, monthly, etc.]; f) the duration of each service to be provided [e.g. 6 weeks, 3 months, all year, etc.]; g) the address location where the service is provided; h) indicate if a fee is charged, if so, provide the following: 1 } a fee schedule, 2 } the reason for charging the fee, and 3 } how the fee is utilized to benefit the **project**; and i) explain how this service works towards achieving an objective detailed in Section 19.

23. **City-Funded portion of the Project Service Delivery**

Provide evidence that the **project** possesses sufficient staff resources and technical and professional expertise to carry out the proposed services detailed in section 22. Using the **project** services submitted in section 22, provide the following for each service: a) list the job title of the staff person(s) responsible for the delivery of the service; b) describe the qualifications required for this position; c) explain the duties and responsibilities of this position in regards to the **project** service; d) indicate who else will be involved in delivering the **project** service [e.g. partner agencies, subcontractors, volunteers, etc.]; and e) explain their roles and responsibilities.

24. **City-Funded portion of Project Follow-Up**

- a) Describe what follow-up procedure will be conducted by the **project** in FY 2004, once a client has terminated services. Provide the following: 1} the job title of the staff person(s) conducting the follow-up; 2} explain the mechanism that will be utilized to conduct follow-up [e.g. via mail, telephone, in-person, etc.]; 3} explain how the data is collected, maintained and reported [e.g. monitoring spreadsheets, questionnaires, etc.]; 4} indicate when attempts for follow-up begin; 5} indicate the number of follow-up attempts that are made before attempts are no longer made; and 6} identify what objective(s) is measured.

- b) If follow-up will not be conducted, explain why client status after termination is not deemed necessary by the **project**.

25. Personnel Budget

If City funds will be used for staff position costs [salaries & wages and fringe benefits], please provide information on each position that is to be funded.

- a) Enter the number of positions to be funded: _____
- b) Enter the total Personnel amount requested from City funding: \$ _____
- c) Please complete the table below for each position to be funded: (Round off dollar amounts to whole numbers.)

[illegible]

FRINGE BENEFITS	Total City Funds Requested	\$
Justification Description/Project Benefit		

26. **Non-Personnel Budget**

If City funds will be used for non-personnel items, please provide information on each item to be funded

- a) Enter the number of line items to be funded: _____
- b) Enter the total Non-Personnel amount requested from City funding: \$ _____
- c) Please complete a line item description for each line item to be funded in the tables below:

SUPPLIES	City Funds Requested	\$	% City Funded	%
Justification Description/Project Benefit				
POSTAGE	City Funds Requested	\$	% City Funded	%
Justification Description/Project Benefit				
FOOD	City Funds Requested	\$	% City Funded	%
Justification Description/Project Benefit				
CONSULTANT SERVICES	City Funds Requested	\$	% City Funded	%
Justification Description/Project Benefit				
MAINTENANCE/REPAIR	City Funds Requested	\$	% City Funded	%
Justification Description/Project Benefit				

Non-Personnel Budget, Continued

PUBLICATIONS/PRINTING	City Funds Requested	\$	% City Funded	%
Justification Description/Project Benefit				
TRANSPORTATION	City Funds Requested	\$	% City Funded	%
Justification Description/Project Benefit				
OTHER EXPENSES	City Funds Requested	\$	% City Funded	%
Justification Description/Project Benefit				
INDIRECT COSTS/ ADMIN OVERHEAD	City Funds Requested	\$	% City Funded	%
Justification Description/Project Benefit				
RENT	City Funds Requested	\$	% City Funded	%
Justification Description/Project Benefit				
EQUIPMENT RENTAL	City Funds Requested	\$	% City Funded	%
Justification Description/Project Benefit				

Non-Personnel Budget, Continued

INSURANCE	City Funds Requested	\$	% City Funded	%
Justification Description/Project Benefit				
UTILITIES	City Funds Requested	\$	% City Funded	%
Justification Description/Project Benefit				
TELEPHONE	City Funds Requested	\$	% City Funded	%
Justification Description/Project Benefit				
EQUIPMENT PURCHASE	City Funds Requested	\$	% City Funded	%
Justification Description/Project Benefit				

27. **TOTAL PROJECT AMOUNT REQUESTED**

Total Personnel Amount Requested	+	Total Non-Personnel Amount Requested	=	TOTAL PROJECT AMOUNT REQUESTED
\$		\$		\$

28. **Project Budget Cost Effectiveness**

- a) Calculate proposed cost per client. [Total funds requested/Number of clients to be served.]

1} Total Funds Requested

\$

2} Number of clients to be served

3} Cost per client

\$

- b) Calculate proposed cost per unit. [Total funds requested/Number of units of service to be provided.]

1} Total Funds Requested

\$

2} Number of units of service to be provided

3} Cost per unit of service

\$

- c) Discuss the cost effectiveness of the proposed budget and what procedures the agency will utilize to evaluate and ensure the cost effectiveness of the proposed budget.

CERTIFICATION

On _____, 2003, the Board of Directors of _____
(applicant) took official action to approve this application and to authorize its submittal to the City of San Diego
for funding consideration under its 2003/2004 Social Services program.

We, the undersigned duly-authorized agents of _____
(applicant), do hereby state, that to the best of our knowledge, the information contained in this application for
Social Services funds is true and correct. ***If a grant is awarded on the basis of this application, all project
information detailed in the application will be implemented accordingly and the project shall
commence within ninety (90) days of award.*** Applicant assures the City of San Diego that the applicant will
administer funds and understands that the Social Services funds are disbursed on a reimbursement basis. The
laws and regulations of the United States Department of Housing and Urban Development (HUD) and the City of
San Diego will govern any Social Services funding resulting from this
application. _____ (Applicant) agrees to enter into an
Agreement with the City of San Diego for its 2003/04 Social Services grant and to adhere to all Social Services
program requirements.

CHAIRPERSON OF THE BOARD

Name (Print)

Signature

Date

CHIEF AGENCY OFFICIAL

Name (Print)

Title

Signature

Date